## PART B - FEE(S) TRANSMITTAL

Complete and send this form, together wit pplicable fee(s), to: Mail Mail Stop ISSUE E

Commissioner for Patents P.O. Box 1450 Alexandria, Virginia 22313-1450

or Fax (571)-273-2885

INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 5 should be completed where appropriate. All further correspondence including the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address are corrected below or directed otherwise in Block 1. by (a) specifying a new correspondence address; as paratar "FEE ADDRESS" for

maintenance fee notificat		etwise in Diock 1, by (c				uno or	(e) moteming a sepa				
CURRENT CORRESPONDENCE ADDRESS (Note: Use Block I for any change of address)					Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.						
62665	7590 12/28					Certificate of Mailing or Transmission					
BUCHANAN INGERSOLL & ROONEY, PC P.O. BOX 1404 ALEXANDRIA, VA 22313-1404					I hereby certify that this Fee(S) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mall in an envelope addressed to the Mail Stop ISSUE File address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.						
								(Di	epositor's mune)		
									(Signature)		
							(Date)				
APPLICATION NO.	FILING DATE		FIRST NAMED INVEN	TOR	ATTORNEY		NEY DOCKET NO.	OCKET NO. CONFIRMATION NO			
09/680.991 10/06/2000			John Murata		P2580US1-712		1957				
TITLE OF INVENTION	STREAMING SERVE	R ADMINISTRATION I	PROTOCOL								
APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE D	DUE	PREV. PAID ISSUE	E FEE	TOTAL FEE(S) DUE	DATE	BDUE		
nonprovisional	NO	\$1510	\$0		\$0		\$1510	03/29	9/2010		
EXAMINER		ART UNIT	CLASS-SUBCLASS	3							
TRUONG, LECHI		2194	709-317000								
1. Change of correspondence address or indication of "Fee Address" (37 CFR 1363).  Change of correspondence address for Change of Correspondence Address for Change of Correspondence Address form PTOSB/122) attached.  Pier Address indication (or "Fee Address" Indication form PTOSB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.			2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively. (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered pure or agent) and the names of up to 3 registered pure or agent and the names of up to 3 registered pure or agent and the names of up to 3 registered pure or agent and the names of up to 3 registered pure or agent and the names of up to 3 registered pure or agent and the names of up to 3 registered pure or agent and the names of up to 3 registered pure or agent and the names of up to 3 registered pure or agent and the names of up to 3 registered pure or agent and the names of up to 3 registered pure or agent and the names of up to 3 registered pure or agent and the names of up to 4 registere								
3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (pint or type) PLEASE NOTE: Unless an assignee is identified below, no assignee dat wall appear on the patent. If an assignee is identified below, the document has been frecordation as extend in 37 CFR 3.11. Completion of this form is NOT a substitute for filling an assignment. (A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY)							een filed for				
APPLE	CUPERTINO, CA										
Please check the appropriate assignee category or categories (will not be printed on the patent) : 🔲 Individual 🚨 Corporation or other private group entity 🚨 Government											
4a. The following fee(s) are submitted:  2 Issue Fee  Publication Fee (No small entity discount permitted)  Advance Order - # of Copies  3			ib. Payment of Fee(e): (Please first reapply any previously paid issue fee shown above)  ☐ A check is enclosed.  ② Payment by credit card. Form PTO-2038 is attached.  ③ The Director is hereby substorized to charge the required fee(e), any defliciency, or credit any overpayment, to Deposit Account Number 0.244800 (enclose an extra copy of this form).								
5. Change in Entity Sta	s SMALL ENTITY stat	us. See 37 CFR 1.27.					TITY status. See 37 C				
NOTE: The Issue Fee an	d Publication Fee (if req	uired) will not be accepte ates Patent and Trademar	ed from anyone other t	han th	ne applicant; a regi	istered a	ittorney or agent; or t	ne assignee or	other party in		
Authorized Signature	/C4 3 -1				Date N	1arch	23, 2010				
Typed or printed nam	e Steven As				Registration N						
This collection of inform an application. Confiden submitting the complete this form and/or suggest Box 1450, Alexandria, V Alexandria, Virginia 223	nation is required by 37 of tiality is governed by 35 d application form to the ions for reducing this but firginia 22313-1450. Do 113-1450.	CFR 1.311. The informati 5 U.S.C. 122 and 37 CFR e USPTO. Time will var irden, should be sent to the O NOT SEND FEES OR	on is required to obtai 1.14. This collection y depending upon the the Chief Information O COMPLETED FORM	in or re is esti indivi Office AS TO	etain a benefit by t imated to take 12 idual case. Any co r, U.S. Patent and O THIS ADDRESS	the publ minutes omment Traden S. SENI	ic which is to file (an to complete, includi s on the amount of ti nark Office, U.S. Dep of TO: Commissioner	d by the USPI ng gathering, p me you requir artment of Co for Patents, P.	O to process) separing, and e to complete mmerce, P.O. O. Box 1450,		

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.